

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-------------|--------|---------|
| FEE DETERMINATION | <i>W.S.</i> | | 3/27/00 |
| O.I.P.E. CLASSIFIER | | | 3-31-00 |
| FORMALITY REVIEW | <i>V.R.</i> | 71480 | 5-17-00 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------------|-----------|
| Final Original | |
| 1 | ✓ 5/11/01 |
| 2 | ✓ 5/11/01 |
| 3 | ✓ 5/11/01 |
| 4 | ✓ 5/11/01 |
| 5 | ✓ 5/11/01 |
| 6 | ✓ 5/11/01 |
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| Claim | Date |
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| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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